



General Assembly

January Session, 2005

Bill No. 6688

LCO No. 3466

03466_____

Referred to Committee on Human Services

Introduced by:

REP. WARD, 86th Dist.

SEN. DELUCA, 32nd Dist.

**AN ACT IMPLEMENTING THE GOVERNOR'S BUDGET
RECOMMENDATIONS WITH RESPECT TO SOCIAL SERVICES
PROGRAMS.**

Be it enacted by the Senate and House of Representatives in General Assembly convened:

1 Section 1. Subsection (g) of section 17b-261 of the general statutes is
2 repealed and the following is substituted in lieu thereof (*Effective July*
3 *1, 2005*):

4 (g) To the extent permitted by federal law, Medicaid eligibility shall
5 be extended for [two years] one year to a family that becomes
6 ineligible for medical assistance under Section 1931 of the Social
7 Security Act [while] due to income from employment by one of its
8 members who is a caretaker relative [is employed] or due to receipt of
9 child support income or a family with an adult who, within six months
10 of becoming ineligible under Section 1931 of the Social Security Act
11 becomes employed.

12 Sec. 2. Subsection (b) of section 17b-104 of the general statutes is
13 repealed and the following is substituted in lieu thereof (*Effective July*

14 1, 2005):

15 (b) On July 1, 1988, and annually thereafter, the commissioner shall
 16 increase the payment standards over those of the previous fiscal year
 17 under the aid to families with dependent children program, temporary
 18 family assistance program and the state-administered general
 19 assistance program by the percentage increase, if any, in the most
 20 recent calendar year average in the consumer price index for urban
 21 consumers over the average for the previous calendar year, provided
 22 the annual increase, if any, shall not exceed five per cent, except that
 23 the payment standards for the fiscal years ending June 30, 1992, June
 24 30, 1993, June 30, 1994, June 30, 1995, June 30, 1996, June 30, 1997, June
 25 30, 1998, June 30, 1999, June 30, 2000, June 30, 2001, June 30, 2002, June
 26 30, 2003, June 30, 2004, [and] June 30, 2005, June 30, 2006, and June 30,
 27 2007, shall not be increased. On January 1, 1994, the payment
 28 standards shall be equal to the standards of need in effect July 1, 1993.

29 Sec. 3. Subsection (a) of section 17b-106 of the general statutes is
 30 repealed and the following is substituted in lieu thereof (*Effective July*
 31 *1, 2005*):

32 (a) On July 1, 1985, the Commissioner of Social Services shall
 33 increase the adult payment standards for the state supplement to the
 34 federal Supplemental Security Income Program by four and
 35 three-tenths per cent over the standards for the fiscal year ending June
 36 30, 1985, provided the commissioner shall apply the appropriate
 37 disregards. Notwithstanding the provisions of any regulation to the
 38 contrary, effective July 1, 1994, the commissioner shall reduce the
 39 appropriate unearned income disregard for recipients of the state
 40 supplement to the federal Supplemental Security Income Program by
 41 seven per cent, provided if sufficient funds are available within
 42 accounts in the Department of Social Services and are transferred to
 43 the old age assistance account, the aid to the blind account and the aid
 44 to the disabled account, the commissioner shall increase the unearned
 45 income disregard for recipients of the state supplement to the federal

46 Supplemental Security Income Program to a level not to exceed that in
 47 effect on June 30, 1994. On July 1, 1989, and annually thereafter, the
 48 Commissioner of Social Services shall increase the adult payment
 49 standards over those of the previous fiscal year for the state
 50 supplement to the federal Supplemental Security Income Program by
 51 the percentage increase, if any, in the most recent calendar year
 52 average in the consumer price index for urban consumers over the
 53 average for the previous calendar year, provided the annual increase,
 54 if any, shall not exceed five per cent, except that the adult payment
 55 standards for the fiscal years ending June 30, 1993, June 30, 1994, June
 56 30, 1995, June 30, 1996, June 30, 1997, June 30, 1998, June 30, 1999, June
 57 30, 2000, June 30, 2001, June 30, 2002, June 30, 2003, June 30, 2004, [and]
 58 June 30, 2005, June 30, 2006, and June 30, 2007, shall not be increased.
 59 Effective October 1, 1991, the coverage of excess utility costs for
 60 recipients of the state supplement to the federal Supplemental Security
 61 Income Program is eliminated. Notwithstanding the provisions of this
 62 section, the Commissioner of Social Services may increase the personal
 63 needs allowance component of the adult payment standard as
 64 necessary to meet federal maintenance of effort requirements.

65 Sec. 4. Section 17b-7a of the general statutes is repealed and the
 66 following is substituted in lieu thereof (*Effective July 1, 2005*):

67 The Commissioner of Social Services shall develop a state-wide
 68 fraud early detection system. The purpose of such system shall be to
 69 identify, investigate and determine if an application for assistance
 70 under (1) the temporary family assistance program, (2) the food stamp
 71 program, (3) the child care subsidy program, or [(3)] (4) the Medicaid
 72 program pursuant to Title XIX of the Social Security Act is fraudulent
 73 prior to granting assistance. The commissioner shall adopt regulations,
 74 in accordance with chapter 54, for the purpose of developing and
 75 implementing said system.

76 Sec. 5. Subsection (a) of section 17b-280 of the general statutes is
 77 repealed and the following is substituted in lieu thereof (*Effective July*

78 1, 2005):

79 (a) The state shall reimburse for all legend drugs provided under
80 the Medicaid, state-administered general assistance, ConnPACE and
81 Connecticut AIDS drug assistance programs at the lower of (1) the rate
82 established by the [Health Care Finance Administration] Centers for
83 Medicare and Medicaid Services as the federal acquisition cost, or [, if
84 no such rate is established, the commissioner shall establish and
85 periodically revise the estimated acquisition cost in accordance with
86 federal regulations] (2) the average wholesale price minus fifteen per
87 cent. The commissioner shall also establish a professional fee of three
88 dollars [and fifteen cents] for each prescription to be paid to licensed
89 pharmacies for dispensing drugs to Medicaid, ConnPACE and
90 Connecticut AIDS drug assistance recipients in accordance with
91 federal regulations; and on and after September 4, 1991, payment for
92 legend and nonlegend drugs provided to Medicaid recipients shall be
93 based upon the actual package size dispensed. Effective October 1,
94 1991, reimbursement for over-the-counter drugs for such recipients
95 shall be limited to those over-the-counter drugs and products
96 published in the Connecticut Formulary, or the cross reference list,
97 issued by the commissioner. The cost of all over-the-counter drugs and
98 products provided to residents of nursing facilities, chronic disease
99 hospitals, and intermediate care facilities for the mentally retarded
100 shall be included in the facilities' per diem rate.

101 Sec. 6. Section 17b-261d of the general statutes is repealed and the
102 following is substituted in lieu thereof (*Effective July 1, 2005*):

103 The Commissioner of Social Services [shall] may design and
104 implement a care enhancement and disease management initiative,
105 [which] if such initiative is determined to be cost effective by the
106 commissioner. The initiative shall provide for an integrated and
107 systematic approach for managing the health care needs of high cost
108 Medicaid recipients. Notwithstanding any provision of the general
109 statutes, the commissioner may contract with an entity to effectuate the

110 purposes of this section, provided such entity has an established and
111 demonstrated capability in the design and implementation of a disease
112 management initiative. [The] If implemented, the commissioner shall
113 report annually on the status of the care enhancement and disease
114 management initiative to the joint standing committees of the General
115 Assembly having cognizance of matters relating to appropriations and
116 the budgets of state agencies and human services.

117 Sec. 7. Subsection (h) of section 17b-292 of the general statutes is
118 repealed and the following is substituted in lieu thereof (*Effective July*
119 *1, 2005*):

120 (h) Not more than twelve months after the determination of
121 eligibility for benefits under the HUSKY Plan, Part A and Part B and
122 annually thereafter, the commissioner or the servicer, as the case may
123 be, shall determine if the child continues to be eligible for the plan. The
124 commissioner or the servicer shall mail an application form to each
125 participant in the plan for the purposes of obtaining information to
126 make a determination on eligibility. [To the extent permitted by federal
127 law, in determining eligibility for benefits under the HUSKY Plan, Part
128 A and Part B with respect to family income, the commissioner or the
129 servicer shall rely upon information provided in such form by the
130 participant unless the commissioner or the servicer has reason to
131 believe that such information is inaccurate or incomplete.] The
132 determination of eligibility shall be coordinated with health plan open
133 enrollment periods.

134 Sec. 8. Subsection (g) of section 17b-239 of the general statutes is
135 repealed and the following is substituted in lieu thereof (*Effective July*
136 *1, 2005*):

137 (g) Effective June 1, 2001, the commissioner shall establish inpatient
138 hospital rates in accordance with the method specified in regulations
139 adopted pursuant to this section and applied for the rate period
140 beginning October 1, 2000, except that the commissioner shall update
141 each hospital's target amount per discharge to the actual allowable cost

142 per discharge based upon the 1999 cost report filing multiplied by
143 sixty-two and one-half per cent if such amount is higher than the target
144 amount per discharge for the rate period beginning October 1, 2000, as
145 adjusted for the ten per cent incentive identified in Section 4005 of
146 Public Law 101-508. If a hospital's rate is increased pursuant to this
147 subsection, the hospital shall not receive the ten per cent incentive
148 identified in Section 4005 of Public Law 101-508. For rate periods
149 beginning October 1, 2001, through March 31, 2008, the commissioner
150 shall not apply an annual adjustment factor to the target amount per
151 discharge. Effective April 1, 2005, the revised target amount per
152 discharge for each hospital with a target amount per discharge less
153 than three thousand seven hundred fifty dollars shall be three
154 thousand seven hundred fifty dollars. Effective [April] October 1, 2006,
155 the revised target amount per discharge for each hospital with a target
156 amount per discharge less than four thousand dollars shall be four
157 thousand dollars. Effective [April] October 1, 2007, the revised target
158 amount per discharge for each hospital with a target amount per
159 discharge less than four thousand two hundred fifty dollars shall be
160 four thousand two hundred fifty dollars.

161 Sec. 9. Subsection (a) of section 7-127d of the general statutes is
162 repealed and the following is substituted in lieu thereof (*Effective July*
163 *1, 2005*):

164 (a) There is established a neighborhood youth center grant program
165 which shall be administered by the Office of Policy and Management,
166 except that operation of the program shall be suspended for the fiscal
167 years ending June 30, 2004, [and] June 30, 2005, June 30, 2006, and June
168 30, 2007.

169 Sec. 10. (NEW) (*Effective July 1, 2005*) To the extent permitted under
170 42 CFR 447.54, each Medicaid recipient shall pay a copayment of three
171 dollars (1) per visit for outpatient medical services delivered by an
172 enrolled Medicaid provider, and (2) for each prescription drug at the
173 time the prescription is filled.

174 Sec. 11. (NEW) (*Effective July 1, 2005*) (a) The Commissioner of Social
 175 Services shall seek a waiver from federal law for the purpose of
 176 enhancing the enrollment of HUSKY Plan, Part A recipients in
 177 available employer sponsored private health insurance. Such a waiver
 178 shall include, but shall not be limited to, provisions that: (1) Require
 179 the enrollment of HUSKY Plan, Part A caretaker relatives and
 180 dependents in any available employer sponsored health insurance to
 181 the maximum extent of available coverage as a condition of eligibility;
 182 (2) require a subsidy to be paid directly to the HUSKY Plan, Part A
 183 caretaker relative in an amount equal to the premium payment
 184 requirements of any available employer sponsored health insurance
 185 paid by way of payroll deduction; and (3) assure HUSKY Plan, Part A
 186 coverage requirements for medical assistance not covered by any
 187 available employment sponsored health insurance.

188 (b) Notwithstanding any provision of the general statutes or any
 189 provision established in a contract between an employer and a health
 190 insurance carrier, no HUSKY Plan, Part A recipient, required to enroll
 191 in available employer sponsored health insurance under this section,
 192 shall be prohibited from enrollment due to limitations on enrollment of
 193 employees in employer sponsored health insurance to open enrollment
 194 periods.

195 (c) The Commissioner of Social Services, pursuant to section 17b-10
 196 of the general statutes, may implement policies and procedures
 197 necessary to administer the provisions of this section while in the
 198 process of adopting such policies and procedures as regulation,
 199 provided the commissioner prints notice of the intent to adopt the
 200 regulation in the Connecticut Law Journal not later than twenty days
 201 after the date of implementation. Policies and procedures implemented
 202 pursuant to this section shall be valid until the time final regulations
 203 are adopted.

204 Sec. 12. Section 17b-295 of the general statutes is repealed and the
 205 following is substituted in lieu thereof (*Effective July 1, 2005*):

206 (a) The commissioner shall impose cost-sharing requirements
207 including the payment of a premium or copayment in connection with
208 services provided under the HUSKY Plan, Part B, to the extent
209 permitted by federal law, and in accordance with the following
210 limitations:

211 (1) On and after [October 1, 2003] July 1, 2005, the commissioner
212 [may] shall increase the maximum annual aggregate cost-sharing
213 requirements provided that such cost-sharing requirements shall not
214 exceed five per cent of the family's gross annual income. The
215 commissioner [may] shall impose a premium requirement on families,
216 whose income exceeds one hundred eighty-five per cent of the federal
217 poverty level but does not exceed two hundred thirty-five per cent of
218 the federal poverty level as a component of the family's cost-sharing
219 responsibility provided the family's annual combined premiums and
220 copayments do not exceed the maximum annual aggregate cost-
221 sharing requirement; and

222 (2) The commissioner shall require each managed care plan to
223 monitor copayments and premiums under the provisions of
224 subdivision (1) of this subsection.

225 (b) (1) Except as provided in subdivision (2) of this subsection, the
226 commissioner may impose limitations on the amount, duration and
227 scope of benefits under the HUSKY Plan, Part B.

228 (2) The limitations adopted by the commissioner pursuant to
229 subdivision (1) of this subsection shall not preclude coverage of any
230 item of durable medical equipment or service that is medically
231 necessary.

232 Sec. 13. Subsection (a) of section 17b-790a of the general statutes is
233 repealed and the following is substituted in lieu thereof (*Effective July*
234 *1, 2005*):

235 (a) The Commissioner of Social Services, within available

236 appropriations, shall establish a food assistance program for
 237 individuals entering the United States prior to April 1, 1998, whose
 238 immigrant status meets the eligibility requirements of the federal Food
 239 Stamp Act of 1977, as amended, but who are no longer eligible for food
 240 stamps solely due to their immigrant status under Public Law 104-193.
 241 Individuals who enter the United States after April 1, 1998, must have
 242 resided in the state for six months prior to becoming eligible for the
 243 state program. In no event shall an application for assistance under
 244 this section be granted after June 30, 2005. The commissioner may
 245 administer such program in accordance with the provisions of the
 246 federal food stamp program, except those pertaining to the
 247 determination of immigrant status under Public Law 104-193. Food
 248 assistance program benefits provided to eligible individuals under this
 249 subsection that are in effect on June 30, 2005, shall remain in effect
 250 without increase.

251 Sec. 14. Section 17b-112c of the general statutes is repealed and the
 252 following is substituted in lieu thereof (*Effective July 1, 2005*):

253 (a) Qualified aliens, as defined in Section 431 of Public Law 104-193,
 254 who do not qualify for federally-funded cash assistance, other lawfully
 255 residing immigrant aliens or aliens who formerly held the status of
 256 permanently residing under color of law shall be eligible for [solely
 257 state-funded temporary family assistance or] cash assistance under the
 258 state-administered general assistance program, provided other
 259 conditions of eligibility are met. Qualified aliens, as defined in Section
 260 431 of Public Law 104-193, who do not qualify for federally-funded
 261 cash assistance, other lawfully residing immigrant aliens or aliens who
 262 formerly held the status of permanently residing under color of law,
 263 who would otherwise have been eligible for assistance under the
 264 temporary family assistance program regardless of citizenship status,
 265 shall not be eligible for benefits under this section. An individual who
 266 is granted assistance under this section must pursue citizenship to the
 267 maximum extent allowed by law as a condition of eligibility unless
 268 incapable of doing so due to a medical problem, language barrier or

269 other reason as determined by the Commissioner of Social Services.
270 Notwithstanding the provisions of this section, any qualified alien or
271 other lawfully residing immigrant alien or alien who formerly held the
272 status of permanently residing under color of law who is a victim of
273 domestic violence or who has mental retardation shall be eligible for
274 assistance under this section.

275 (b) Notwithstanding the provisions of subsection (a) of this section:
276 (1) A qualified alien admitted into the United States on or after August
277 22, 1996, or other lawfully residing immigrant alien determined
278 eligible for [temporary family assistance or] cash assistance under the
279 state-administered general assistance program prior to July 1, 1997, or
280 other lawfully residing immigrant alien or alien who formerly held the
281 status of permanently residing under color of law, shall remain
282 eligible, and (2) a qualified alien, other lawfully residing immigrant
283 alien admitted into the United States on or after August 22, 1996, other
284 lawfully residing immigrant alien or an alien who formerly held the
285 status of permanently residing under color of law and not determined
286 eligible prior to July 1, 1997, shall be eligible for such assistance
287 subsequent to six months from establishing residency in this state.
288 Qualified aliens, other lawfully residing immigrant aliens admitted
289 into the United States on or after August 22, 1996, other lawfully
290 residing immigrant aliens or aliens who formerly held the status of
291 permanently residing under color of law, who would otherwise have
292 been eligible for assistance under the temporary family assistance
293 program, regardless of citizenship status, shall not be eligible for
294 benefits under this section.

295 (c) Notwithstanding the provisions of this section, a qualified alien
296 or other lawfully residing immigrant alien or alien who formerly held
297 the status of permanently residing under color of law who is a victim
298 of domestic violence or who has mental retardation shall be eligible for
299 assistance under this section.

300 Sec. 15. Section 17b-257b of the general statutes is repealed and the

301 following is substituted in lieu thereof (*Effective July 1, 2005*):

302 Qualified aliens, as defined in Section 431 of Public Law 104-193,
 303 admitted into the United States on or after August 22, 1996, other
 304 lawfully residing immigrant aliens or aliens who formerly held the
 305 status of permanently residing under color of law who have been
 306 determined eligible for [Medicaid or for] state-administered general
 307 assistance medical aid prior to July 1, 1997, may be eligible for [state-
 308 funded medical assistance which shall provide coverage to the same
 309 extent as the Medicaid program,] state-administered general assistance
 310 medical aid or the HUSKY Plan, Part B provided other conditions of
 311 eligibility are met. Such qualified aliens or lawfully residing immigrant
 312 aliens or aliens who formerly held the status of permanently residing
 313 under color of law who have not been determined eligible for
 314 [Medicaid or for] state-administered general assistance medical aid
 315 prior to July 1, 1997, shall be eligible for state-funded assistance or the
 316 HUSKY Plan, Part B subsequent to six months from establishing
 317 residency in this state. Qualified aliens, as defined in Section 431 of
 318 Public Law 104-93, admitted into the United States on or after August
 319 22, 1996, other lawfully residing immigrant aliens or aliens who
 320 formerly held the status of permanently residing under color of law,
 321 who would have been eligible for assistance under Medicaid,
 322 regardless of citizenship status, shall not be eligible for benefits under
 323 this section. Notwithstanding the provisions of this section, any
 324 qualified alien or other lawfully residing immigrant alien or alien who
 325 formerly held the status of permanently residing under color of law
 326 who is a victim of domestic violence or who has mental retardation
 327 shall be eligible for [state-funded] assistance under state-administered
 328 general assistance medical aid or the HUSKY Plan, Part B pursuant to
 329 this section. [Only individuals who are not eligible for Medicaid shall
 330 be eligible for state-funded assistance pursuant to this section.]

331 Sec. 16. Section 17b-802 of the general statutes is repealed and the
 332 following is substituted in lieu thereof (*Effective July 1, 2005*):

333 (a) The Commissioner of Social Services shall establish, within
334 available appropriations, and administer a security deposit guarantee
335 program for persons who (1) (A) are recipients of temporary family
336 assistance, aid under the state supplement program, or state-
337 administered general assistance, or (B) have a documented showing of
338 financial need, and (2) (A) are residing in emergency shelters or other
339 emergency housing, cannot remain in permanent housing due to any
340 reason specified in subsection (a) of section 17b-808, or are served a
341 notice to quit in a summary process action instituted pursuant to
342 chapter 832, or (B) have a rental assistance program or federal Section 8
343 certificate or voucher. Under such program, the Commissioner of
344 Social Services may provide security deposit guarantees for use by
345 such persons in lieu of a security deposit on a rental dwelling unit.
346 Eligible persons may receive a security deposit guarantee in an amount
347 not to exceed the equivalent of two months' rent on such rental unit.
348 No person may apply for and receive a security deposit guarantee
349 more than once in any [eighteen-month] five-year period without the
350 express authorization of the Commissioner of Social Services, except as
351 provided in subsection (b) of this section. The Commissioner of Social
352 Services may establish priorities for [allocating] providing security
353 deposit guarantees [between] to eligible persons described in
354 subparagraphs (A) and (B) of subdivision (2) of this subsection, in
355 order to administer the program within available appropriations.

356 (b) In the case of any person who qualifies for a guarantee, the
357 Commissioner of Social Services, or any emergency shelter under
358 contract with the Department of Social Services to assist in the
359 administration of the security deposit guarantee program established
360 pursuant to subsection (a) of this section, may execute a written
361 agreement to pay the landlord for any damages suffered by the
362 landlord due to the tenant's failure to comply with such tenant's
363 obligations as defined in section 47a-21, provided the amount of any
364 such payment shall not exceed the amount of the requested security
365 deposit. Notwithstanding the provisions of subsection (a) of this
366 section, if a person who has previously received a grant for a security

367 deposit or a security deposit guarantee becomes eligible for a
368 subsequent security deposit guarantee within [eighteen months] five
369 years after a claim has been paid on a prior security deposit guarantee,
370 such person may receive a security deposit guarantee. The amount of
371 the subsequent security deposit guarantee for which such person
372 would otherwise have been eligible shall be reduced by (1) any
373 amount of a previous grant which has not been returned to the
374 department pursuant to section 47a-21, or (2) the amount of any
375 payment made to the landlord for damages pursuant to this
376 subsection.

377 (c) Any payment made pursuant to this section to any person
378 receiving temporary family assistance, aid under the state supplement
379 program or state-administered general assistance shall not be deducted
380 from the amount of assistance to which the recipient would otherwise
381 be entitled.

382 (d) On and after July 1, 2000, no special need or special benefit
383 payments shall be made by the commissioner for security deposits
384 from the temporary family assistance, state supplement, or state-
385 administered general assistance programs.

386 (e) The Commissioner of Social Services may, within available
387 appropriations, on a case-by-case basis, provide a security deposit
388 grant to a person eligible for the security deposit guarantee program
389 established under subsection (a) of this section, in an amount not to
390 exceed the equivalent of one month's rent on such rental unit provided
391 the commissioner determines that emergency circumstances exist
392 which threaten the health, safety or welfare of a child who resides with
393 such person. Such person shall not be eligible for more than one such
394 grant without the authorization of said commissioner. Nothing in this
395 section shall preclude the approval of such one-month security deposit
396 grant in conjunction with a one-month security deposit guarantee.

397 (f) The Commissioner of Social Services may provide a security
398 deposit grant to a person receiving such grant through any emergency

399 shelter under an existing contract with the Department of Social
400 Services to assist in the administration of the security deposit program,
401 but in no event shall a payment be authorized after October 1, 2000.
402 Nothing in this section shall preclude the commissioner from entering
403 into a contract with one or more emergency shelters for the purpose of
404 issuing security deposit guarantees.

405 (g) The Commissioner of Social Services shall adopt regulations, in
406 accordance with the provisions of chapter 54, to administer the
407 program established pursuant to this section and to set eligibility
408 criteria for the program, but may implement the program [until June
409 30, 2003,] while in the process of adopting such regulations provided
410 notice of intent to adopt the regulations is published in the Connecticut
411 Law Journal [within] not later than twenty days after the date of
412 implementation of the program.

413 Sec. 17. (NEW) (*Effective July 1, 2005*) The Commissioner of Social
414 Services shall establish prior authorization procedures under the
415 Medicaid program for (1) admissions and lengths of stay in chronic
416 disease hospitals; (2) free-standing detoxification centers; and (3) home
417 health services, including, but not limited to, each episode of care
418 requiring skilled nursing visits and each request for more than
419 fourteen hours per week of home health aide visits. The Commissioner
420 of Social Services may contract with an entity for administration of any
421 such aspect of prior authorization or may expand the scope of an
422 existing contract with an entity that performs utilization review
423 services on behalf of the department. The commissioner, pursuant to
424 section 17b-10 of the general statutes, may implement policies and
425 procedures necessary to administer the provisions of this section while
426 in the process of adopting such policies and procedures as regulation,
427 provided the commissioner prints notice of intent to adopt regulations
428 in the Connecticut Law Journal not later than twenty days after the
429 date of implementation. Policies and procedures implemented
430 pursuant to this section shall be valid until the time final regulations
431 are adopted.

This act shall take effect as follows and shall amend the following sections:		
Section 1	<i>July 1, 2005</i>	17b-261(g)
Sec. 2	<i>July 1, 2005</i>	17b-104(b)
Sec. 3	<i>July 1, 2005</i>	17b-106(a)
Sec. 4	<i>July 1, 2005</i>	17b-7a
Sec. 5	<i>July 1, 2005</i>	17b-280(a)
Sec. 6	<i>July 1, 2005</i>	17b-261d
Sec. 7	<i>July 1, 2005</i>	17b-292(h)
Sec. 8	<i>July 1, 2005</i>	17b-239(g)
Sec. 9	<i>July 1, 2005</i>	7-127d(a)
Sec. 10	<i>July 1, 2005</i>	New section
Sec. 11	<i>July 1, 2005</i>	New section
Sec. 12	<i>July 1, 2005</i>	17b-295
Sec. 13	<i>July 1, 2005</i>	17b-790a(a)
Sec. 14	<i>July 1, 2005</i>	17b-112c
Sec. 15	<i>July 1, 2005</i>	17b-257b
Sec. 16	<i>July 1, 2005</i>	17b-802
Sec. 17	<i>July 1, 2005</i>	New section

Statement of Purpose:

To implement the Governor's budget recommendations.

[Proposed deletions are enclosed in brackets. Proposed additions are indicated by underline, except that when the entire text of a bill or resolution or a section of a bill or resolution is new, it is not underlined.]